

To apply for ABC Sales Associate I or Warehouse Worker:

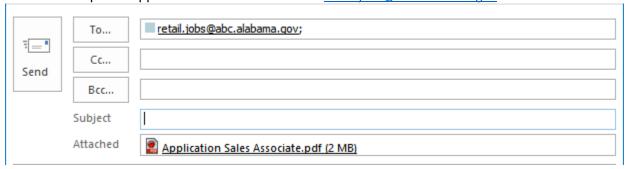
- Click on the link for the classification for which you are applying. <u>Click here to apply for Sales Associate</u> Click here to apply for Warehouse Worker
- 2. Complete the application and save the form to your desktop.
  - a. For Internet Explorer users: 114% 🔻 Tools This file includes fillable rm fields. This file includes fillables will fields.

    You can print the comple ed form and save it to your device or Acrobat.com. Highlight Existing Fields Form 3 - Revised February 2015 DO NOT WRITE IN THIS SPACE APPLICATION FOR EXAMINATION SPIRITS RETURN TO: ALABAMA ABC BOARD P PERSONNEL DEPARTMENT 2715 GUNTER PARK DRIVE WEST General Instructions MONTGOMERY, ALABAMA 36109 EMAIL: retail.jobs@abc.alabama.gov A separate application is required for FAX: (334) 260-5450 each job. Do not write in shaded areas.
    Complete all parts of the application. 角 Applications not properly completed will be returned. Photocopied and ENTER LAST 4 DIGITS OF SOCIAL SECURITY NUMBER BELOW. facsimile appli-cations will be accepted. Option (if applicable) ABC Sales Associate 11706 Full Name Email Address First M. I. Last Address House or Apartment Number Street Zip Code City State County Telephone Number: Home Cell Work Area Code Area Code Area Code

b. For Google Chrome users:

Form 3 - Revised February 2015		
DO NOT WRITE IN THIS SPACE	APPLICATION FOR EXAMINATION SELECT INC. SPIRITS	
	RETURN TO: ALABAMA ABC BOARD	
	PERSONNEL DEPARTMENT 2715	
	GUNTER PARK DRIVE WEST MONTGOMERY, ALABAMA 36109 General Instructions	
	FMAIL: ratali joke@alee alabama gov	
	FAX: (334) 260-5450  A separate application is required for each job. Do not write in shaded areas	
	Complete all parts of the application.	i l
	ENTER LAST 4 DIGITS OF SOCIAL SECURITY NUMBER BELOW  Applications not properly completed	d
	will be returned. Photocopied and facsimile appli-cations will be accepted	
	Option (if applicable)	<b>=</b>
ABC Sales Associate 11	706	
Full Name		
First	M. I. Last Email Address	
Address		
House or Apartment	Number Street	
City	State County Zip Code	
City	State County Zip Code	
Telephone Number: Home	Cell Work	
Area C	ode Area Code Area Code	
The following	nformation is required for governmental reporting or recordkeeping purposes:	
Date of Birth	Sex (check one) 1. ( ) Male 2. ( ) Female	
(Mont		
Page ( bot ) 1 ( White 2 )	DNI A DESCRIPTION OF THE PROPERTY OF THE PROPE	
Race (check one) 1. () White 2. (	Black 3. Hispanic 4. Asian or Pacific Islander 5. American Indian or Alaskan Native 6. Other	
EDUCATION:	CLICK ON THE HIGHEST GRADE OF SCHOOL COMPLETED. ED	
High School Diploma or GED? Yes	No 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 LC	
PROVIDE IN	ORMATION ON ALL SCHOOLS ATTENDED. SPECIFY UNDERGRADUATE OR GRADUATE WORK.	
	Dates of Attendance Credit Did You	W .
	Month/Year Hours Graduate? Type of Degree	Q Q P F
Name and Location of School		

3. Email the completed application as an attachment to <a href="mailto:retail.jobs@abc.alabama.gov">retail.jobs@abc.alabama.gov</a>



You may also print the completed application and fax it to 334-260-5450.

Thank you for your interest in employment with the Alabama ABC Board!